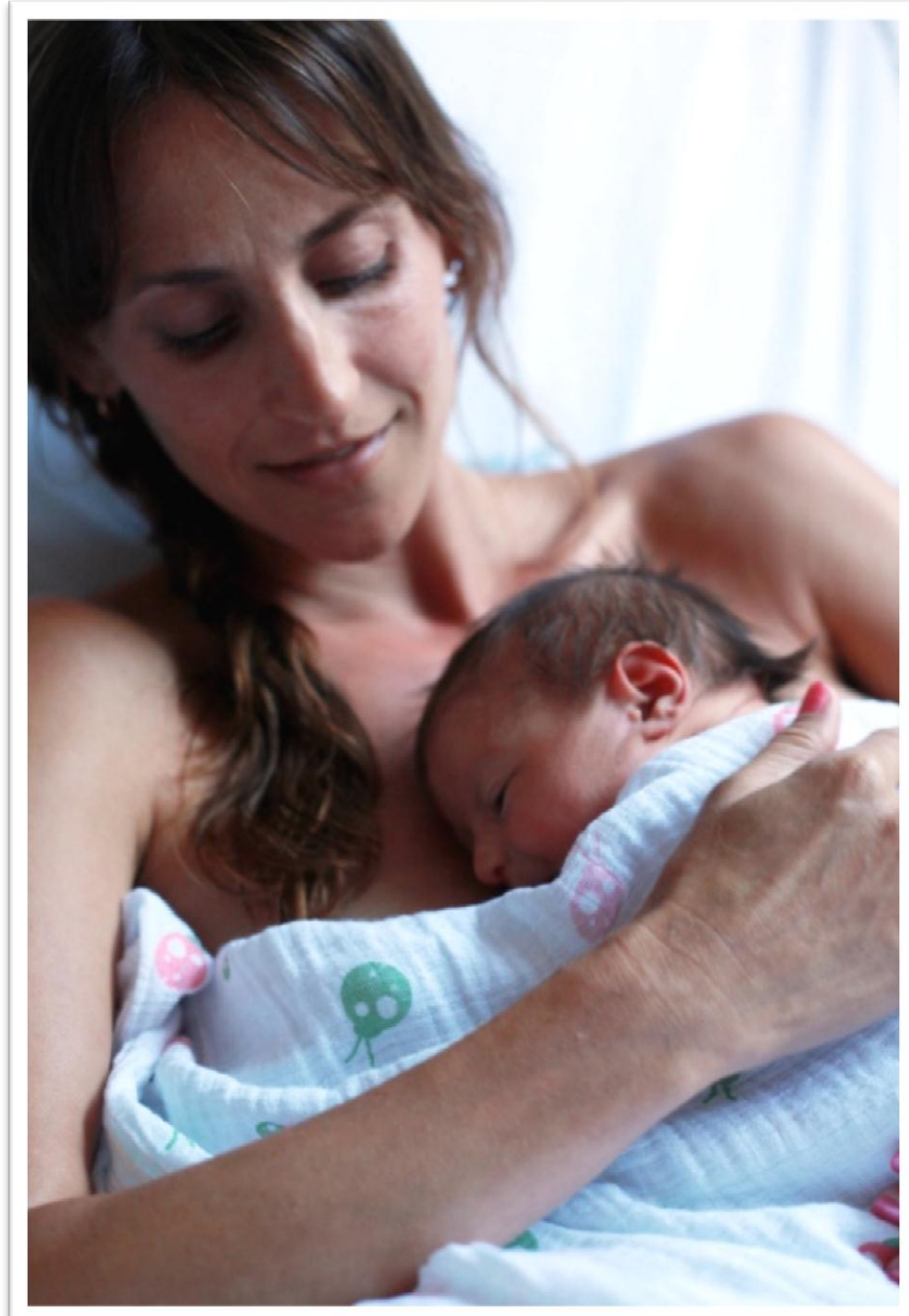


A Statewide Approach to Motivate Hospitals to Develop Comprehensive Breastfeeding Policies in California

Suzanne Haydu, MPH, RD, Carina Saraiva, MPH, Jeanette Panchula, BSW, RN, PHN, IBCLC and Leona Shields, RN, PHN, NP, MFT
California Department of Public Health; Maternal, Child & Adolescent Health Division

PURPOSE: To increase the number of California hospitals with evidence-based infant feeding and maternity care policies that support exclusive breastfeeding

Background



Breastfeeding is an early intervention that reduces the risk of acute diseases, such as infections, or chronic diseases, such as obesity and Type 2 diabetes.^{1,2}

Early in-hospital breastfeeding initiation fosters long-term success.^{3,4} Hospital infant feeding policies and practices in the maternity setting can reduce barriers to a mother's decision to breastfeed.⁵

Utilizing Title V MCH Block Grant Funds the Maternal, Child and Adolescent Health (MCAH) Division of the California Department of Public Health (CDPH) collaborates with hospitals to promote evidence-based infant feeding and maternity care policies.

California Hospital Infant Feeding Policy

By January 1, 2014, the Hospital Infant Feeding Act (California Health & Safety Code §123366) requires that:

- All California hospitals providing maternity care services have an infant feeding policy.
- Policies need to promote breastfeeding and utilize guidance from the Baby-Friendly Hospital Initiative⁶ or the CDPH Model Hospital Policy Recommendations.
- Policies must be clearly posted and routinely communicated to staff.

Monitoring Infant Feeding Policies

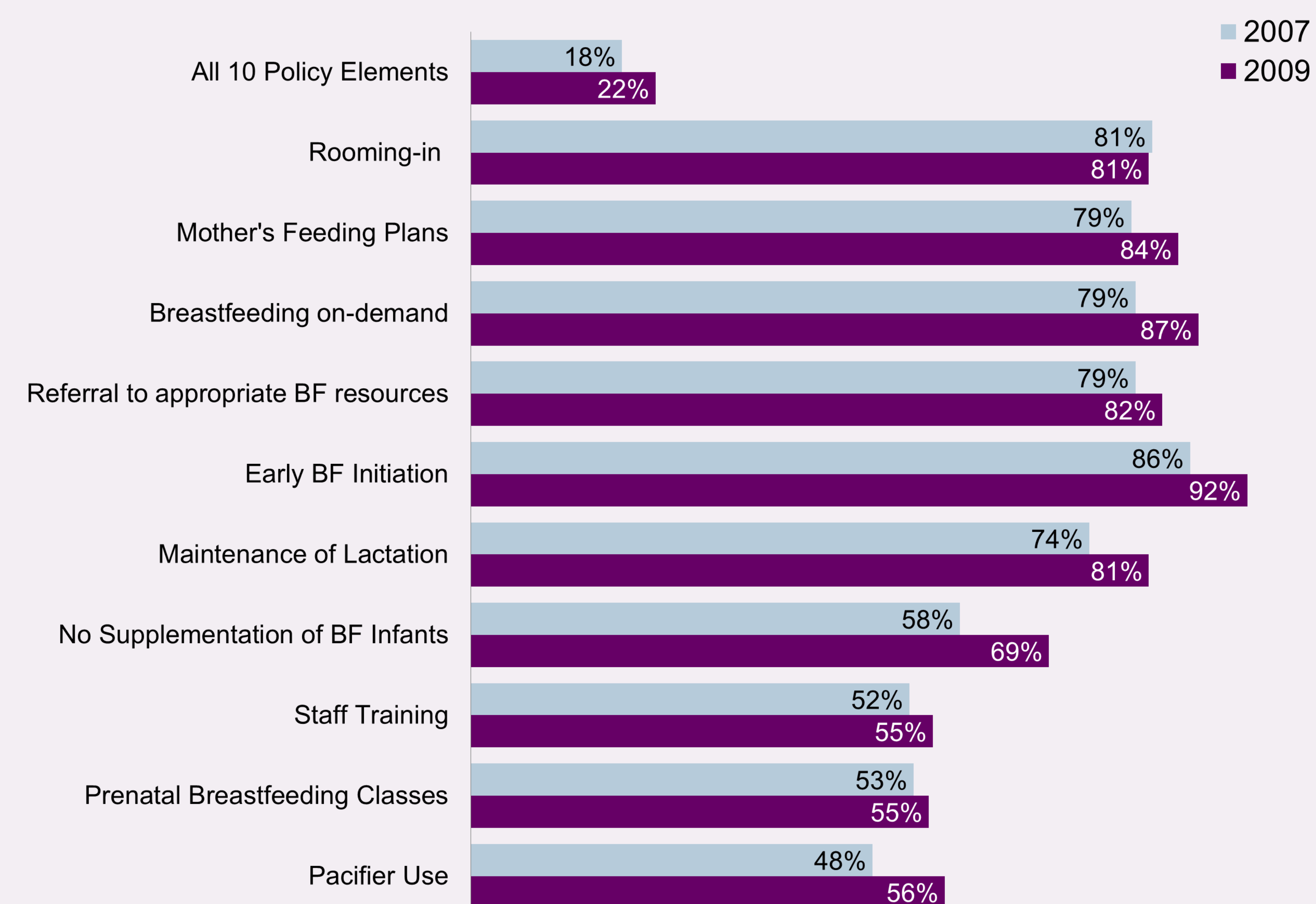


The Maternity Practices in Infant Nutrition and Care (mPINC) is a national survey of maternity care practices and policies conducted every 2 years by the Centers for Disease Control and Prevention (CDC). It captures data related to WHO/UNICEF's Baby-Friendly *Ten Steps to Successful Breastfeeding*, including whether a hospital has policies that include these 10 recommended elements.

These data can be used to motivate hospitals to develop a comprehensive infant feeding policy that supports breastfeeding and monitors progress over time.

Hospital Infant Feeding and Maternity Policies in California

The mPINC Survey data can be used to track the proportion of California hospitals with a comprehensive infant feeding and maternity care policy covering all 10 recommended elements (see chart below), as well as individual elements over time.



According to the 2009 California mPINC Survey Data:

- Less than 1 in 4 California maternity hospitals has comprehensive policies that include all 10 recommended policy elements that support breastfeeding.
- From 2007 to 2009, improvement was observed in the overall proportion of hospitals that have implemented comprehensive policies as well as inclusion of each individual policy element.
- The following policy elements were most frequently included:
 - 24 hour rooming-in
 - Documentation of mother's feeding plans
 - Early breastfeeding initiation
 - Breastfeeding on demand
 - Maintenance of lactation during periods of separation
 - Referral to appropriate breastfeeding resources post-discharge
- The following policy elements were least frequently included:
 - Prenatal breastfeeding classes
 - Staff training
 - No supplementation of breastfeeding infants
 - Pacifier use



Data Source: CDC, Maternity Practices in Infant Nutrition and Care (mPINC) Survey, California 2007 and 2009

MCAH Resources and Technical Assistance

The MCAH Division provides a diverse approach to assist hospitals to develop evidence-based infant feeding policies. A variety of resources and technical assistance are available on the CDPH's Breastfeeding and Healthy Living web-site <http://cdph.ca.gov/breastfeeding>.

Regional Perinatal Programs of California (RPPC)

Regional consultants are available to assist hospitals in implementing evidence-based maternity care.



Model Hospital Policy Recommendations and Toolkit

Similar to the Baby-Friendly Ten Steps to Successful Breastfeeding, these policies list proven actions to increase breastfeeding within the hospital. An internet-based toolkit is available to assist hospitals.

Birth and Beyond California (BBC) Hospital Breastfeeding Quality Improvement & Staff Training Demonstration Project

This Project utilizes Quality Improvement (QI) methods and training to implement evidence-based policies and practices that support breastfeeding within the maternity care setting.

California Breastfeeding Data Dissemination

The MCAH Division analyzes and publishes annual hospital breastfeeding initiation data and regional and county-level mPINC Benchmark Reports. These provide local stakeholders with data to facilitate their work with hospitals in improving breastfeeding support. In addition, utilizing data from the California's Maternal and Infant Health Assessment (MIHA) Survey, MCAH reports on the effect that maternity care practices have on breastfeeding initiation, duration and exclusivity..

Annual California Hospital Breastfeeding Summit

MCAH co-sponsor's this Summit to provide resources to motivate and assist hospital staff to collaborate and adopt and implement policies and practices that support exclusive breastfeeding.

Public Health Implication

- Title V MCH Block Grant Funds can be utilized to develop and provide diverse resources and technical assistance for hospitals to develop comprehensive infant feeding policies and practices that support exclusive breastfeeding.
- Data from the mPINC Survey is a valuable resource to motivate hospitals to implement infant feeding and care policies and practices that support breastfeeding and to track their progress over time.

References

1. Stuebe A. The risks of not breastfeeding for mothers and infants. *Rev Obstet Gynecol*. Fall 2009;2(4):222-231.
2. Ip S, Chung M, Raman G, et al. Breastfeeding and maternal and infant health outcomes in developed countries. *Evid Rep Technol Assess (Full Rep)*. Apr 2007(153):1-186.
3. Merewood A, Mehta SD, Chamberlain LB, Philipp BL, Bauchner H. Breastfeeding rates in US Baby-Friendly hospitals: results of a national survey. *Pediatrics*. Sep 2005;116(3):628-634.
4. Murray EK, Ricketts S, Dellaport J. Hospital practices that increase breastfeeding duration: results from a population-based study. *Birth*. Sep 2007;34(3):202-211.
5. U.S. Department of Health and Human Services. The Surgeon General's Call to Action to Support Breastfeeding. Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General; 2011.
6. Baby-Friendly USA. www.babyfriendlyusa.org